

# City of College Station **Employment Information Page**

#### **An Equal Opportunity Employer**

Thank you for your interest in employment with the City of College Station. The City of College Station is an equal opportunity employer and does not discriminate in employment practices based on race, color, sex, religion, national origin, age, or disability. Reasonable accommodation for persons with disabilities will be made upon request. Please provide at least 48 hours advance notice.

## **Information For Applicants** (Please Read Carefully)

- The City of College Station requires all individuals who wish to be considered for employment to **complete and sign a City of College Station Employment Application Form**. If the application is submitted online, it must be signed by the applicant either at the interview or at the time of job offer. A resume may be attached to the application but not substituted for the application. Incomplete applications will not be processed.
- Completed applications **must** be received in the Human Resources Office by 5:00 p.m. on the date of the deadline to apply. Application forms postmarked by the date of the deadline to apply will be accepted.
- The application form and all attachments become the official property of the City of College Station. Any questions, concerns, and/or complaints regarding the application process should be directed to the Human Resources Department.
- The process takes a **minimum** of 2-3 weeks from the date of the deadline to apply; however, some positions may take longer. The Hiring Department will contact applicants selected for interviews and will make the final hiring decision.
- For information concerning the status of your application, please call Human Resources at 979-764-3517.
- All information on the application form and/or attached resume is subject to verification by the Hiring Department and/or Human Resources Department. As a condition of employment, applicants will be subject to a criminal background check, medical examination (for certain positions), drug test, and verification/review of driver's license record. Applicants refusing to cooperate, failing to show up for a scheduled appointments and/or failing to successfully pass required tests will be disqualified for consideration of employment with the City of College Station for a one (1) year period.

### **CITY OF COLLEGE STATION**

## **Voluntary Disclosure Statement**

NAME	SS#		
basis of race, color, sex, to assist us in complying	ion is an Equal Opportunity Employer and does not discriminate against any individual on the religion, national origin, age or disability. You are invited to complete the following information with federal record keeping requirements. Your response shall remain confidential, will be kept dication, and shall in no way affect a decision regarding your employment.		
AGE:Under 40	Over 40		
RACE/ETHNIC IDEN	ΓΙFICATION		
White	Includes persons having origins in any of the original peoples of Europe, North Africa, or Middle East.		
Black	Includes persons having origins in any of the black racial groups of Africa.		
Hispanic	Includes persons of Mexican, Puerto Rican, Cuban, Central, or South American, or their Spanish culture or origin, regardless of race.		
Asian or Pacific Islander	Includes persons having origins in any of the original peoples of the Far East, Southeast, Asian, the Indian Subcontinent, or the Pacific Islands. This area includes: China, Japan, Korea, The Philippine Islands, and Samoa.		
American Indian Or Alaska Native	Includes persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.		
VETERAN STATUS  None (includes those	with insufficient military service to qualify for Veteran Status)		
Non-Disabled Vietna	, ,		
Non-Disabled Vetera	nn other than Vietnam Conflict		
Disabled Vietnam-era	a Veteran		
Disabled Veteran			
AMERCIAN WITH DISABILITIES ACT (ADA) STATUS  Do you have a disability under ADA? Yes No  Disabled means (1) physical or mental impairment that substantially limits one or more life activities, (2) record of such an impairment, or (3) regarded as having such an impairment.			
SOURCE OF REFERRAL How did you find out about			
☐ Walk-in ☐ City	Employee		
Radio	Professional Journal		
Newspaper	Recruiting Drive		
Job Fair Other			



# **EMPLOYMENT APPLICATION**

#### **An Equal Opportunity Employer**

Specific position applying for:	Desired Salary:		
Additional positions applying for:			
Are you seeking: ☐ Full-time ☐ Part-time			
Last Name First Name	Middle Name	S	ocial Security Number
Present Street Address	City	State Zi <sub>l</sub>	o Code
Home Telephone	Work Telephone	E-	Mail (optional)
If under 18 years of age, can you provide re	equired proof of your eligibility to w	ork? Yes □	No 🗆
Are you legally eligible to work in the U.S.?	(Verification will be required upon	hire) Yes $\square$	No □
Have you ever served in the Armed Forces	? Yes ☐ No ☐ Date of Serv	vice:	to
Type of Discharge:			
Are you currently a City employee? Yes □	No ☐ If yes, list the department	and position:	
Have you ever been employed by the City?	Yes D No D If yes, list the d	epartment(s) and date	s below:
Department	Position	From	То
Are you related by blood or marriage to any	courrent City of College Station on	polovoo or current Cou	incil mombor?
Yes \( \sqrt{\operation} \) No \( \sqrt{\operation} \) If yes, please provide the		iployee of current Coc	mon member?
Name	Relationship	Department/Position	
Have you been convicted of a DUI or DWI	within the past 3 years? Yes		
Is your license presently restricted, suspending yes, give the reason:	ded or revoked? Yes date it began,	☐ No ☐ and date ended (or wi	ll end)
Do you have charges pending or have you a felony or Class A or B misdemeanor? No violations, but include DUI/DWI. Yes □	te: Include offenses for which prob	oation was granted, ex	
<u>Date</u> <u>Offense</u>	County & State	of Offense	<u>Disposition</u>
IMPORTANT! A conviction or deferred adjudication record offense and the position for which you are applying will be con	will not be an absolute to bar employment. Factor	ors such as nature of offense, d	ate and relationship between

	EDUC	CATION		
List Name and Address o	of Schools:	-1	Number of Years Completed	Diploma/ Degree/
				Certificate
High School of GED:				
College or University:				
Subjects Studied:				
Vocational or Technical: _				
Subjects Studied:				
JOB I	RELATED SKILLS AND/OR	LICENSES AND CERTIF	CATIONS	
What skills or additional tra	nining do you have that are related	to the job for which you are app	lying?	
Typing (wpm)	Ten-key by t	touch		
Computer software				
Heavy equipment				
Technical/Skilled craft (me	chanic, electrician, engineering, et	c.)		
Maintenance skills (painting	g, custodial, grounds, etc.)			
Supervisory/Management	Skills			
Customer Service/Interpers	sonal Relations			
Other special skills				
Bilingual Skills <u>Language</u>	<u>Speak</u>	<u>Read</u>	<u>Write</u> □ Fluent □ Good □ Fair	
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair		
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair	□ Fluent □ G	Good □ Fair
	□ Fluent □ Good □ Fair	☐ Fluent ☐ Good ☐ Fair	□ Fluent □ G	Good □ Fair
NOTE	E: Applicants may be required to pr	rovide copies of licenses and ce	rtifications.	
reveal race, color, religion,	siness or civic activities and offices national origin, sex, age, disability	or other protected status.)		·

Revised April 2003 Page 2

EMPLOYMENT HISTORY  List names of employers in consecutive order with present or last employer listed first.					
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code					
Telephone	May we contact this employer? Yes □ No □				
Position Title	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?	, the least?				
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code	May we contact this employer? Yes □ No □				
Telephone	, , , ,				
PositionTitle	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?	, the least?				
Name of Employer	Supervisor(s) Name/Title				
Address	Employed From (mo/yr) / To (mo/yr) /				
City, State, Zip Code	May we contact this employer? Yes □ No □				
Telephone	ividy we contact this employer: 165 L No L				
Position Title	Reason for Leaving				
Job Duties					
What did/do you like the most about this position?	, the least?				
Comments: Include explanation of any gaps in employm	ent:				
Have you ever been discharged from any employment or asked to resign in lieu of discharge? Yes □ No □ If yes, specify the circumstances:					

Revised April 2003 Page 3

Have you worked as attended school under a	ny other names? Ver						
Have you worked or attended school under a	•						
If yes, give names:							
EMPLOYMENT, PROFESSIONAL, AND/OR ACADEMIC REFERENCES							
Name Address	Telephone	Type of A	Acquaintance	ntance Years Known			
	SOURCE OF RE	FERRAI					
How did you find out about us/this position?							
☐ Walk-in ☐ City Employee	☐ Job Line	☐ Cable Television	ŭ				
□ Newspaper		☐ Radio					
Professional Journal		☐ Job Fair					
☐ Recruiting Drive		Other					
PLEASE READ EAG	CH STATEMENT CA	AREFULLY BEFORE S	IGNING				
By my signature below, I certify, authorize or acknown	owledge:						
	_	whether on this document	or on any attachi	ment is complete			
That all the information provided by me in connection with my application, whether on this document or on any attachment, is complete, true and correct. I know the City will rely upon this information in making a decision to hire me. Consequently, I further understand that any misstatement, falsification, or omission of information will void my application and prevent any further processing. If the City obtains such information after I am hired, I will be subject to termination from my employment with the City.							
For the purpose of verification, any persons, organ give any and all requested information concerning							
That as a condition of employment with the City, I must successfully pass a thorough background investigation, which may include a criminal history check, driving record verification, etc.							
That as a condition of employment with the City, I may be required to submit to a medical examination and/or drug test by a physician or laboratory selected by and at the expense of the City at such time as is required.							
That any offer of employment with the City of Colle will continue for any specified period of time.	ege Station is at-will and	does not constitute a promise	e or guarantee tha	at my employment			
That any employment offer will be at the continuing I am aware that this application and all attachment accepted for employment.							
That if employed, I must successfully complete an	introductory period of en	nployment.					
Signature:		Date:					
Please submit c	ompleted application in	n person, online, or by fax	to:				
City of College Station  Human Resources Department							
1101 Texas Ave.							
	College Station, T	Х //842					
Online: v	www.ci.college-station. Fax: (979) 764						

Revised April 2003 Page 4